

Application or Docket Number

	PATEN	ϽĶĽ	10743470									
	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL TYPE	ENTITY	OF	OTHER THAN SMALL ENTITY	
	TOTAL CLAIN	61	61 NUMBER FILED		NUMBER EXTRA		RATE	FEE	·	RATE	FEE	
	FOR	NUMBE					BASIC FI		OR		·	
	TOTAL CHARG	295m	295 minus 20=		* 275		X\$ 9=	0170	-			
10	NDEPENDENT		Λ O minus 3 =		7		X43=	24/3	7	V00		
~	NULTIPLE DEPI	ENDENT CLAIM		<u> </u>		山			301.		X86=	
*	* If the difference in column 1 is less than zero, enter "0" in column 2								145°	[∂] OR	+290=	
								TOTAL	3300	OR	TOTAL	<u> </u>
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL	
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	. ADDI- TIONAL FEE
AMENDMENT A	Total	*	Minus	**		Ξ		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		ē .		X43=		OR	X86=	
L_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
							L A	TOTAL DOIT. FEE		- 1	TOTAL ADDIT. FEE	
_	 	(Column 1) CLAIMS	· · · · · ·	(Colum HIGHE		(Column 3)			1 4554			1001
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	JSLY.	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus ⁻	***		.=		X43=		OR	X86=	
لـــ	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	IPLE DEPENDENT CLAIM			T	+145=		OR	+290=	
٠				•	·		L	TOTAL			TOTAL	
		(Column 1)		(Column		(Column 3)	AL	DIT. FEE		μ • · · · μ	DDIT. FEEL	
		CLAIMS REMAINING AFTER AMENDMENT	•	HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	⊀ :	Minus	**	1	=		X\$ 9:=		OR	X\$18=	
L L	Independent	<u></u> -	Minus	***		=	-	X43=		. F	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR	7002	
lf i	the entry in colum	nn 1 is less than the	entovio colum	an 2 weita "O"	in colum		-+	145=		OR .	+290=	
* If 1	the "Highest Nuπ	in T is less than the ober Previously Paid ober Previously Paid	I For" IN THIS	SPACE is le	ss.than 2	20, enter "20, "	ADC	TOTAL DIT. FEE		OR AC	TOTAL DIT. FEE	
		per Previously Paid					ound	in the appr	opriate box	in colum	n 1.	